09/18/2008 16:20

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 08 0 1 2008 8 0 3 1 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 09 18 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Hospital Association PAC D D " D 0.8 0 1 2008 8.0 3 1 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 1507360.96 January 1 (b) Cash on Hand at 1245859.23 Begining of Reporting Period 136391.34 825637.38 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1382250.57 2332998.34 6(a) and 6(c) for Column B) 75289.83 1026037.60 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1306960.74 1306960.74 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

M M 8

From:

D D 1

2008

To:

м м 8 0 ^D 3 1

2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	57617.83	337320.17
	(ii) Unitemized	45306.09	190296.41
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	102923.92	527616.58
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	975.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	102923.92	528591.58
2.	Transfers From Affiliated/Other Party Committees	33000.00	267260.33
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	26000.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	467.42	3785.47
18.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	136391.34	825637.38
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	136391.34	825637.38

23.

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 8314.83 93847.52 Expenditures..... (c) Total Operating Expenditures 8314.83 93847.52 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to Federal Candidates/Committees.....and Other Political Committees..... 66975.00 840975.00 24. Independent Expenditure 0.00 88000.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 804.75 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 1560.33 (such as PACs) (d) Total Contribution Refunds 0.00 2365.08 (add Lines 28(a), (b), and (c)) 0.00 850.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 75289.83 1026037.60 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

75289.83

1026037.60

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	102923.92	528591.58
34.	Total Contribution Refunds (from Line 28(d))	0.00	2365.08
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	102923.92	526226.50
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8314.83	93847.52
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	8314.83	93847.52

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 93 (check only one) X 11a
A	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personante and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Dennis D Keefe Mailing Address 35 Warthin Circle		Date of Receipt 0 8 0 5 2 0 0 8
	City Norwood	State Zip Code MA 02062-5667	Transaction ID: 15771414 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	350.00
	Name of Employer Cambridge Health Alliance Receipt For: Primary General Other (specify)	Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	
 B.	Full Name (Last, First, Middle Initial) Mr. Francis M Saba Mailing Address 14 Prospect Street	Date of Receipt 0 8 1 2 2 0 0 8	
	City	Transaction ID: 15797732	
	Milford	MA 01757-3090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Milford Regional Medical Center Receipt For:	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼	r
	Primary General Other (specify) ▼	350.00]
	Full Name (Last, First, Middle Initial) Mr. Thomas Corley	Date of Receipt	
	Mailing Address North 5633 Lidgerwoo	08 / 15 / 2008	
	City Spokane	State Zip Code WA 99208-1224	Transaction ID: 15817416 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 33200-1224	250.00
	Name of Employer Holy Family Hospital	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00]
\[SUBTOTAL of Receipts This Page (optional)		950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/93 (check only one) X 11a	
Any information copied from such Reports an or for commercial purposes, other than using	ny information copied from such Reports and Statements may not be sold or used by any persor for commercial purposes, other than using the name and address of any political committee to s			
NAME OF COMMITTEE (In Full) American Hospital Association PAC		,,,		
Full Name (Last, First, Middle Initial) Ms. Susan Reiter			Date of Receipt	
Mailing Address PO Box 307	0 8 1 5 2 0 0 8			
City	State	Zip Code	Transaction ID: 15817417	
Enumclaw FEC ID number of contributing federal political committee.	C	98022-0307	Amount of Each Receipt this Period 350.00	
Name of Employer Franciscan Health System	Occupation Trustee	1		
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy			Date of Receipt	
Mailing Address 14432 SE Eastgate Way, Ste 300 City State Zip Code			08 / 15 / 2008	
City Bellevue	State WA	Transaction ID: 15817418 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	98007-6493	500.00	
Name of Employer PeaceHealth	Occupation President	and Chief Executive Office		
Receipt For: Primary General Other (specify) ▼	- '	Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Mr. John Fletcher			Date of Receipt	
Mailing Address 506 Second Avenue Suite 1200	9		0 8 1 5 2 0 0 8	
City Seattle	State WA	Zip Code 98104-2343	Transaction ID: 15817472 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	30104 2040	500.00	
Name of Employer Providence Health System	Occupation Chief Exe	cutive Officer		
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optiona	<u> </u>		1350.00	

	EDULE A (FEC Form 3X) IZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 93 (check only one) X 11a 11b 11c 12 15 16 17
or for co	ormation copied from such Reports and St commercial purposes, other than using the IE OF COMMITTEE (In Full) erican Hospital Association PAC	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
A. Mr. F Maili City Yak	Name (Last, First, Middle Initial) Richard W Linneweh, , Jr. ng Address 2811 Tieton Drive Lima ID number of contributing ral political committee.	State Zip Code WA 98902-3799	Date of Receipt M M M
Nam Yaki spita	e of Employer ma Valley Memorial Ho-	Occupation President and Chief Executive Office Aggregate Year-to-Date 500.00	er
M r. 0	Name (Last, First, Middle Initial) Curt Hohman ng Address 47931 Oak Ridge Place)	Date of Receipt 0 8 1 5 2 0 0 8
FEC	risburg ID number of contributing ral political committee.	State Zip Code SD 57032-8239	Transaction ID: 15818430 Amount of Each Receipt this Period 175.00
<u>and</u>	e of Employer a McKennan Hospital University eipt For: Primary Other (specify)	Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 175.00	
Mr J	Name (Last, First, Middle Initial) ames Muellenbach ng Address 730 Second Avenue Sc	Date of Receipt 0 8 1 5 2 0 0 8	
City Min	Suite 1100 neapolis	State Zip Code MN 55402-2455	Transaction ID: 15818470 Amount of Each Receipt this Period
FEC	ID number of contributing ral political committee.	C	250.00
Nam Leo	e of Employer A. Daily	Occupation Director, Regional Business Develop	omen
Rece	eipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTO	TAL of Receipts This Page (optional)		925.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(or for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Bruce J. Rueben		Date of Receipt
	Mailing Address 306 East College Aver		08 15 2008
	City <u>Tallahassee</u>	State Zip Code FL 32301-1522	Transaction ID: 15818472
	FEC ID number of contributing federal political committee.	C 32501-1322	Amount of Each Receipt this Period 177.87
	Name of Employer Florida Hospital Associat- ion	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 364.59	
– В.	Full Name (Last, First, Middle Initial) Mr. William Mason Moss Mailing Address 2300 Opitz Boulevard	Date of Receipt	
	wiaiming Address 2300 Opitz Boulevard	08 15 2008	
	City Woodbridge	State Zip Code VA 22191-3311	Transaction ID: 15819784
	FEC ID number of contributing federal political committee.	C 22191-3311	Amount of Each Receipt this Period 350.00
	Name of Employer Potomac Hospital	Occupation President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
– C.	Full Name (Last, First, Middle Initial) Mr. Fred M Rankin, III		Date of Receipt
	Mailing Address 1001 Sam Perry Boule	08 15 2008	
	City	State Zip Code	Transaction ID: 15819855
	Fredericksburg FEC ID number of contributing federal political committee.	VA 22401-4453	Amount of Each Receipt this Period 350.00
	Name of Employer Mary Washington Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		877.87
	TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
-	Full Name (Last, First, Middle Initial) Ms. Mary L. Blunt			Date of Receipt
	Mailing Address 801 Hidden Harbor Ct.	•		08 15 2008
	City Chesapeake	State VA	Zip Code 23322-7076	Transaction ID: 15819894 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Sentara Healthcare	Occupation Presiden		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms. Teresa Edwards			Date of Receipt
	Mailing Address 15 Somerset Court			0 8 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 15819897
	Williamsburg	VA	23188-1539	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Williamsburg Community Ho- spital	Occupation COO	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		350.00	
	Full Name (Last, First, Middle Initial) Mr. David L Bernd	1		Date of Receipt
	Mailing Address 6015 Poplar Hall Drive			08 15 2008
	City	State	Zip Code	Transaction ID: 15819932
	Norfolk FEC ID number of contributing	VA	23502-3819	Amount of Each Receipt this Period
	federal political committee.	C		350.00
	Name of Employer Sentara Healthcare		ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	1
	Other (specify)			
	SUBTOTAL of Receipts This Page (optional)			1050.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e Crieck Only One)
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by an name and address of any political comm	y person for the purpose of soliciting contributions littee to solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Michael Dudley Mailing Address 4417 Corporation Lane		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code VA 23462-3162	Transaction ID: 15819934
	Virginia Beach FEC ID number of contributing federal political committee.	VA 23462-3162	Amount of Each Receipt this Period 350.00
	Name of Employer Sentara Healthcare Receipt For: Primary General	Occupation President Aggregate Year-to-Date ▼	
	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. J. Andrew Byrd	350.0	Date of Receipt
	Mailing Address 9263 Fawnlily Court	08 15 2008	
	City	State Zip Code	Transaction ID: 15819935
	Manassas FEC ID number of contributing federal political committee.	VA 20110-6082	Amount of Each Receipt this Period 350.00
	Name of Employer Prince William Hospital	Occupation Administrator	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.0	00
. –	Full Name (Last, First, Middle Initial) Dr Richard D. Travers, , M.D.		Date of Receipt
	Mailing Address 8650 Sudley Road Suite 411		0 8 1 5 2 0 0 8
	City	State Zip Code	Transaction ID: 15819946
	Manassas FEC ID number of contributing federal political committee.	VA 20110-4419	Amount of Each Receipt this Period 350.00
	Name of Employer Prince William Hospital	Occupation Vice President, Medical Affairs	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	00
Ţ,	SUBTOTAL of Receipts This Page (optional)		1050.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ \ .	Full Name (Last, First, Middle Initial) Mr. Rodger H Baker Mailing Address 500 Hospital Drive City	State Zip Code	Date of Receipt M
	Warrenton FEC ID number of contributing federal political committee.	VA 20186-3027	Amount of Each Receipt this Period 350.00
	Name of Employer Fauquier Hospital Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 350.00]
	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain F	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	Transaction ID: 15820006	
	New Hope FEC ID number of contributing federal political committee.	PA 18938-5760	Amount of Each Receipt this Period 5.00
	Name of Employer New Jersey Hospital Association Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ 217.93	
	Full Name (Last, First, Middle Initial) Mr. George F Lynn Mailing Address 11 Fischer Road		Date of Receipt
		Olate 7's O. de	08 08 2008
	City Linwood	State Zip Code NJ 08221-1340	Transaction ID: 15820019 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer AtlantiCare	Occupation President Emeritus	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
[SUBTOTAL of Receipts This Page (optional)		855.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 1	
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Valerie Sellers		Date of Receipt	
Mailing Address 82 Millers Grove Roa		08 / 08 / 2008	
City Belle Mead	State Zip Code NJ 08502-4306	Transaction ID: 15820020 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	5.00	
Name of Employer New Jersey Hospital Association Receipt For: Primary General	Occupation Senior V.P., Health Planning & Resea	ar¢	
Other (specify) ▼	320.00		
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountai	n Boad	Date of Receipt	
City New Hope	State Zip Code PA 18938-5760	Transaction ID: 15820031	
FEC ID number of contributing federal political committee.	C 10330-3700	Amount of Each Receipt this Period 20.42	
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 238.35		
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt	
Mailing Address 760 Alexander Road		08 15 2008	
City	State Zip Code NJ 08540-6305	Transaction ID: 15820032	
Princeton FEC ID number of contributing federal political committee.	NJ 08540-6305	Amount of Each Receipt this Period 250.00	
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00		
		275.42	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Eugene Arnone Mailing Address 2500 Sutton Ave		Date of Receipt
City	State Zip Code	08 15 2008
City Northfield	State Zip Code NJ 08225-1043	Transaction ID: 15820034 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer AtlantiCare	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins	Date of Receipt	
Mailing Address 6180 Lower Mounta	08 22 7 2008	
City	Transaction ID: 15820121	
New Hope	PA 18938-5760	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 243.35	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 760 Alexander Road	1	0 8 2 2 2 0 0 8
City	State Zip Code	Transaction ID: 15820123
Princeton	NJ 08540-6305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional) >	260.00

Ç	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/93
	TEMIZED RECEIPTS		for each category of the	(check only one)
•	I EIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
ć	Any information copied from such Reports and Stor for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
∠ A.	Full Name (Last, First, Middle Initial) Ms. Valerie Sellers			Date of Receipt
	Mailing Address 82 Millers Grove Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15820141
	Belle Mead	NJ	08502-4306	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		5.00
	Name of Employer New Jersey Hospital Assoc-	Occupatio		
	iation Receipt For:		.P., Health Planning & Resea	ar C
	Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		325.00	
	Cuter (Speedily)	0 0		
_ В.	Full Name (Last, First, Middle Initial) Mr. Thomas D. Dee, III			Date of Receipt
	Mailing Address 1575 Devonshire Drive	08 15 2008		
	City	State	Zip Code	Transaction ID: 15821235
	Salt Lake City	UT	84108-2552	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer McKay-Dee Hospital Center	Occupatio Trustee	n	
	Receipt For:	-	e Year-to-Date	7
	Primary General	7 iggi ogaic		1
	Other (specify)		250.00	
_ С.	Full Name (Last, First, Middle Initial) Mr. Mark Christopher Coons			Date of Receipt
J .	Mailing Address 544 West Vista Drive			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15821239
	Highland	UT	84003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Intermountain Healthcare, Inc.	Occupatio Regional	n Vice President	
	Receipt For:		e Year-to-Date ▼	
	Primary General	39. 294.0		1
	Other (specify) ▼		500.00	
Г				
	SUBTOTAL of Receipts This Page (optional)		······	755.00

or fo	information copied from such Reports and Str commercial purposes, other than using the IAME OF COMMITTEE (In Full) American Hospital Association PAC ull Name (Last, First, Middle Initial) fr. Larry D. Hancock failing Address 10183 South Loridan L	ratements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee. Date of Receipt
F N N C	American Hospital Association PAC ull Name (Last, First, Middle Initial) fr. Larry D. Hancock failing Address 10183 South Loridan L	ane	Date of Receipt
<u>N</u> N	fr. Larry D. Hancock failing Address 10183 South Loridan L	ane	Date of Receipt
Ċ		ane	<u> </u>
		State Zip Code	0 8 1 5 2 0 0 8 Transaction ID: 15821242
	Sandy	UT 84092-4494	Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	250.00
	lame of Employer ntermountain Healthcare, nc.	Occupation Chief Operating Officer	7
R	eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
M	ull Name (Last, First, Middle Initial) fr. Robert C Cash, , CHE		Date of Receipt
M	lailing Address 1400 North 500 East		08 / 05 / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	ity	State Zip Code	Transaction ID: 15821244
<u>L</u>	ogan	UT 84341-2455	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C	250.00
N L	lame of Employer ogan Regional Hospital	Occupation Administrator	
R	leceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) fr. Merrill Gappmayer		Date of Receipt
_	failing Address 1156 S. State Suite 202		08 15 2008
	ity	State Zip Code	Transaction ID: 15821245
	Orem	UT 84097-8233	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C	250.00
	lame of Emplover ntermountain Healthcare, nc.	Occupation Trustee	
R	eceipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00]
SUF	BTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 93 (check only one) X
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mrs. Anne E. McKnight Mailing Address 210 Rivercrest Drive	e		Date of Receipt
City Morgantown FEC ID number of contributing	State WV	Zip Code 26508-9000	Transaction ID: 15821254 Amount of Each Receipt this Period
federal political committee. Name of Employer Monongalia General Hospital Receipt For: Primary General Other (specify)	Occupation Board Me Aggregate		500.00
Full Name (Last, First, Middle Initial) Ms. Sandra J. Elza Mailing Address Pinnell Street City	State	Zip Code	Date of Receipt M
Ripley FEC ID number of contributing federal political committee. Name of Employer Jackson General Hospital	WV C	25271-1009	Amount of Each Receipt this Period 250.00
Receipt For: Primary General Other (specify)		t and CEO Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Mary Beth Walsh, , M.D. Mailing Address 785 Mamaroneck A	venue		Date of Receipt 0 8 1 5 2 0 0 8
City	State	Zip Code	Transaction ID: 15821870
White Plains FEC ID number of contributing federal political committee.	C	10605-2593	Amount of Each Receipt this Period 250.00
Name of Employer Burke Rehabilitation Hosp- ital Receipt For:		ecutive Officer Year-to-Date	
Primary General Other (specify) ▼	riggiogale	250.00	
SUBTOTAL of Receipts This Page (optional	J)		1000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 93 (check only one) X
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ . .	Full Name (Last, First, Middle Initial) Mr. Stephen Mayfield Mailing Address One North Franklin Stre	eet		Date of Receipt
	Suite 32139 City	State	Zip Code	0 8 1 5 2 0 0 8 Transaction ID: 15821873
	<u>Chicago</u>	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer American Hospital Association Receipt For: Primary General Other (specify) ▼		n ice President e Year-to-Date ▼ 1000.00	1
_ 3.	Full Name (Last, First, Middle Initial) Ms. Sharon A. Gale, RN, MSN			Date of Receipt
	Mailing Address 101 Cambridge Street 220			0 8 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 15821875
	Burlington	MA	01803-3766	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Massachusetts Organization of Nurse Ex	Occupation Executive	n e Director	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Peter W Siersma			Date of Receipt
	Mailing Address P.O. Box 765			08 22 YYYYY
	City	State	Zip Code	Transaction ID: 15821877
	Williamsburg	MA	01096-0765	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Massachusetts Hospital As- sociation	Occupation Trustee	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Scott Wooten Mailing Address 1010 North 96th St, S	te 200	Date of Receipt
City	State Zip Code	08 15 2008 Transaction ID: 15821882
Omaha FEC ID number of contributing federal political committee.	NE 68114-2595	Amount of Each Receipt this Period 350.00
Name of Employer Alegent Health Receipt For: Primary General Other (specify) ▼	Occupation Senior Vice President and Chief Finar Aggregate Year-to-Date ▼ 350.00	nc
Full Name (Last, First, Middle Initial) Mr. John Allen, FACHE Mailing Address P O Box 1990		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15821883
Kearney FEC ID number of contributing federal political committee.	NE 68848-1990	Amount of Each Receipt this Period 350.00
Name of Employer Good Samaritan Health Systems Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date	
Other (specify)	350.00	
Full Name (Last, First, Middle Initial) Mr. John M Fraser, FACHE		Date of Receipt
Mailing Address 8511 West Dodge Ro		08 / 15 / 2008
City <u>O</u> maha	State Zip Code NE 68114-3415	Transaction ID: 15821887 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nebraska Methodist Health System, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional) .		1200.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the (check only one)
or for commercial purposes, other than using the	atements may not be sold or used by name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Myra Evans		Date of Receipt
Mailing Address Rt. 2, Box 239A		0 8 0 1 2 0 0 8
City	State Zip Code	Transaction ID: 15821944
Rushville	MO 64484-9802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Community Hospital, Fairf- ax	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25	0.00
Full Name (Last, First, Middle Initial) Ms. Vivian Austin		Date of Receipt
Mailing Address 10 Shorecrest Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15822207
Savannah	GA 31410-1054	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Joseph's/Candler, Can- dler Hospital	Occupation Nursing Supervisor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 25	0.00
Full Name (Last, First, Middle Initial) Mr. G. Michael Bass		Date of Receipt
Mailing Address 47 Lake Shore Drive		0 8 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 15822209
Newnan	GA 30263-4775	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newnan Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 25	0.00
SUBTOTAL of Receipts This Page (optional)		750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
or for	nformation copied from such Reports and Si commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
Mr Ma Cit	all Name (Last, First, Middle Initial) r. Charles D Hall ailing Address 3023 Oaktree Landing ty arietta EC ID number of contributing	State GA	Zip Code 30066-2382	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
fed Na Pi	ame of Employer edmont Hospital eceipt For: Primary Other (specify)		n pancial Officer e Year-to-Date ▼ 250.00	250.00
Mr	ull Name (Last, First, Middle Initial) r Gregory A Hurst ailing Address 2001 Peachtree Rd NE	, 400		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	ty	State	Zip Code	Transaction ID: 15822211
<u>At</u>	tlanta	GA	30309-1476	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		250.00
Na Pi	ame of Employer edmont Healthcare	Occupatio Executive	n e Vice President Strategy and	ı l
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	ıll Name (Last, First, Middle Initial) r. Ed Lovern			Date of Receipt
Ma	ailing Address 3500 Inman Hill			0 8 1 5 2 0 0 8
Cit		State	Zip Code	Transaction ID: 15822216
<u>M</u>	arietta	GA	30067-5146	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		250.00
pit			t and Chief Executive Officer	
He	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUR	TOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 22 / 93 (check only one)
		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the $$	Statements may r e name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Robert W Maynard			Date of Receipt
Mailing Address 1968 Peachtree Road	NW		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15822217
<u>Atlanta</u>	GA	30309-1281	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Piedmont Hospital	Occupation President	and Chief Executive Office	
Receipt For:	+	/ear-to-Date ▼	
Primary General	gg. ogdio 1		1
Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Mr. James McGahee	1		Date of Receipt
Mailing Address P O Box 1727			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15822218
Valdosta	GA	31603-1727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer South Georgia Medical Cen- ter	Occupation Administra	ator and Chief Executive Of	 fi
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms Diane Patrick			Date of Receipt
Mailing Address 901 East 18th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15822219
Tifton	GA	31794-3648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Tift Regional Medical Cen- ter	Occupation VP, Patien	t Care Svc	
Receipt For:	Aggregate Y	/ear-to-Date ▼	
Primary General Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23/93 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and address or any political committee i	to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. William T Richardson		Date of Receipt
Mailing Address Drawer 747		08 15 7 2008
City	State Zip Code	Transaction ID: 15822220
<u>Tifton</u>	GA 31793-0747	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Tift Regional Medical Cen- ter	Occupation President and Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Robert W. Simmons		Date of Receipt
Mailing Address 155 Isleworth Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15822221
<u>Fayetteville</u>	GA 30215-2763	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Piedmont Hospital	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Peter H Alexander		Date of Receipt
Mailing Address 2001 West 86th Stre	eet, 7th Fl	0 8 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 15822328
Indianapolis	IN 46260-1902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Seton Specialty Hospital of Indianapol	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	

on copied from such Reports and cial purposes, other than using the COMMITTEE (In Full) in Hospital Association PAC (Last, First, Middle Initial) dress 4284 Deere Trail Country and the committee. The properties of contributing itical committee. The properties of the contribution of t	State IN C Occupation CEO Aggregate Terrace State IN	Zip Code 46975-9037	Date of Receipt Date of Receipt Transaction ID: 15822329 Amount of Each Receipt this Period Date of Receipt Date of Receipt
n Hospital Association PAC (Last, First, Middle Initial) dress 4284 Deere Trail Coulor er mber of contributing itical committee. mployer i Hospital or: ary	State IN C Occupation CEO Aggregate Terrace State IN	46975-9037 Year-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D D 2008 Transaction ID: 15822329 Amount of Each Receipt this Period 250.00 Date of Receipt M M / D D D 2008 Transaction ID: 15822330
dress 4284 Deere Trail Countributing tical committee. mployer Hospital or: ary General or (specify) ▼ (Last, First, Middle Initial) te C. Ulrich dress 4655 Running Brook mod mber of contributing	State IN C Occupation CEO Aggregate Terrace State IN	46975-9037 Year-to-Date ▼ 250.00 Zip Code	Date of Receipt M M M / D D D 2008 Transaction ID: 15822329 Amount of Each Receipt this Period 250.00 Date of Receipt M M / D D D 2008 Transaction ID: 15822330
mber of contributing itical committee. mployer Hospital or: ary General or (specify) (Last, First, Middle Initial) te C. Ulrich dress 4655 Running Brook	State IN C Occupation CEO Aggregate Terrace State IN	46975-9037 Year-to-Date ▼ 250.00 Zip Code	Date of Receipt Date of Receipt
mber of contributing itical committee. mployer Hospital or: ary General er (specify) (Last, First, Middle Initial) ee C. Ulrich dress 4655 Running Brook	Occupation CEO Aggregate Terrace State IN	46975-9037 Year-to-Date ▼ 250.00 Zip Code	Date of Receipt Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
mber of contributing itical committee. mployer Hospital or: ary General er (specify) (Last, First, Middle Initial) ee C. Ulrich dress 4655 Running Brook	Occupation CEO Aggregate Terrace State IN	Year-to-Date ▼ 250.00 Zip Code	Date of Receipt M M
mployer Hospital or: ary General or (specify) (Last, First, Middle Initial) oe C. Ulrich dress 4655 Running Brook	Occupation CEO Aggregate Terrace State IN	Year-to-Date ▼ 250.00 Zip Code	Date of Receipt M M D D 2 0 0 8
or: ary General er (specify) ▼ (Last, First, Middle Initial) e C. Ulrich dress 4655 Running Brook	Terrace State IN	Year-to-Date ▼ 250.00 Zip Code	0 8 1 5 2 0 0 8 Transaction ID: 15822330
ary General er (specify) ▼ (Last, First, Middle Initial) ee C. Ulrich dress 4655 Running Brook od mber of contributing	Terrace State IN	250.00 Zip Code	0 8 1 5 2 0 0 8 Transaction ID: 15822330
e C. Ulrich dress 4655 Running Brook od mber of contributing	State IN	•	0 8 1 5 2 0 0 8 Transaction ID: 15822330
dress 4655 Running Brook od mber of contributing	State IN	•	0 8 1 5 2 0 0 8 Transaction ID: 15822330
mber of contributing	IN	•	Transaction ID: 15822330
mber of contributing		46143-9255	
mod John Mileo.	C		250.00
mployer ospital Associat-	Occupation Vice Pres		
,	Aggregate	Year-to-Date ▼ 250.00	
			Date of Receipt
dress 4636 St. John Circle			08 15 2008
	State	Zip Code	Transaction ID: 15822331
9	IN	46077-8140	Amount of Each Receipt this Period
	C		250.00
ospital Associat-			
ary General	Aggregate	Year-to-Date ▼ 250.00	
	General er (specify) (Last, First, Middle Initial) D. Wharry dress 4636 St. John Circle enumber of contributing itical committee. employer spital Associat- or:	ary General er (specify) ▼ (Last, First, Middle Initial) D. Wharry dress 4636 St. John Circle State IN Imber of contributing itical committee. Employer opital Associat- or: Aggregate Aggregate	ary General or (specify) ▼ Clast, First, Middle Initial) D. Wharry dress 4636 St. John Circle State Zip Code IN 46077-8140 Clast First, Middle Initial) Cocupation Vice President Aggregate Year-to-Date ▼ arry General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 93 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Matthew D Bailey		Date of Receipt
Mailing Address 1502 Sagamore Place		08 15 2008
City	State Zip Code	Transaction ID: 15822332
Vincennes	IN 47591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Good Samaritan Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. lan G. Worden		Date of Receipt
Mailing Address 10749 King's Mill Dr.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15822333
Carmel	IN 46032-9467	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Mark Thorn	<u>I</u>	Date of Receipt
Mailing Address 1174 Brentwood Drive		0 8 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15822343
<u>Maryville</u>	MO 64468-2684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Northwest Medical Center	Occupation Vice President, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1500.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. James M. Crouch Mailing Address 5632 State Hwy. P City Albany FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary General Other (specify)	Statements may not be sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any political committee to sold or used by any personne name and address of any personne	Date of Receipt Date of Receipt
A. Full Name (Last, First, Middle Initial) Mr. James M. Crouch Mailing Address 5632 State Hwy. P City Albany FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary Other (specify)	MO 64402-8249 C Occupation Director of Information Technology Aggregate Year-to-Date ▼ 250.00	M M O S O S O S O S O S O S O S O S O S
Mr. James M. Crouch Mailing Address 5632 State Hwy. P City Albany FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary Other (specify)	MO 64402-8249 C Occupation Director of Information Technology Aggregate Year-to-Date ▼ 250.00	M M O S O S O S O S O S O S O S O S O S
City Albany FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary General Other (specify)	MO 64402-8249 C Occupation Director of Information Technology Aggregate Year-to-Date ▼ 250.00	0 8 0 5 2 0 0 8 Transaction ID: 15822344 Amount of Each Receipt this Period
Albany FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary General Other (specify)	MO 64402-8249 C Occupation Director of Information Technology Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Northwest Medical Center Receipt For: Primary General Other (specify)	Occupation Director of Information Technology Aggregate Year-to-Date 250.00	
Receipt For: Primary General Other (specify) ▼	Director of Information Technology Aggregate Year-to-Date ▼ 250.00	
Primary General Other (specify) ▼	250.00	
Full Name (Last First Middle Initial)		
Mr. John W. Richmond, FACHE Mailing Address 5656 US HWY. 136		Date of Receipt
Mailing Address 5656 US HVV Y. 136		08 05 2008
City	State Zip Code	Transaction ID: 15822351
Albany	MO 64402-8177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Northwest Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia Kreutz		Date of Receipt
Mailing Address 900 Potomac Street		08 22 7 2008
City Aurora	State Zip Code CO 80011-6716	Transaction ID: 15822977
FEC ID number of contributing federal political committee.	CO 80011-6716	Amount of Each Receipt this Period
Name of Employer Spalding Rehabilitation Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		2250.00

Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions
American nospital Association PAC		solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Helen R. Strieder Mailing Address 83 Penniman Place		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brookline	State Zip Code MA 02445-4135	Transaction ID: 15822978
FEC ID number of contributing federal political committee.	MA 02445-4135	Amount of Each Receipt this Period 350.00
Name of Employer New England Baptist Hospital Receipt For: Primary General Other (specify) ▼	Occupation Trustee Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. James H. Ross Mailing Address 2900 West Picket Po	st Street	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15823559
Columbia	MO 65203-9581	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer University of Missouri He- alth Care	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Mr. David R. Carpenter		Date of Receipt
Mailing Address 6229 Northlake Drive		08 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15823566
<u>Parkville</u>	MO 64152-6080	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer North Kansas City Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	_	1850.00

poses, other than using the nan ITTEE (In Full) pital Association PAC First, Middle Initial) on 220 Windy Ridge f contributing mmittee. rty Health General ify) First, Middle Initial) man	State Zip Code MO 65672-5725 C Occupation Chief Executive Officer Aggregate Year-to-Date 294.00	Date of Receipt Date of Receipt M M / D D D 2 0 0 8 Transaction ID: 15831230 Amount of Each Receipt this Period 42.00
First, Middle Initial) on 220 Windy Ridge f contributing mmittee. fty Health General ify) First, Middle Initial) man	MO 65672-5725 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Transaction ID: 15831230 Amount of Each Receipt this Period 42.00
f contributing mmittee. rty Health General General First, Middle Initial) man	MO 65672-5725 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Transaction ID: 15831230 Amount of Each Receipt this Period 42.00
f contributing mmittee. rty Health General ify) First, Middle Initial) man	MO 65672-5725 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Transaction ID: 15831230 Amount of Each Receipt this Period 42.00
mmittee. rty Health General ify) First, Middle Initial) man	MO 65672-5725 C Occupation Chief Executive Officer Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 42.00
mmittee. rty Health General ify) First, Middle Initial) man	Occupation Chief Executive Officer Aggregate Year-to-Date ▼	42.00
General ify) ▼ First, Middle Initial) man	Chief Executive Officer Aggregate Year-to-Date ▼	Date of Receipt
General ify) ▼ First, Middle Initial) man		Date of Receipt
man		Date of Receipt
LIO 04 Day 00		
HC 84, Box 26		08 21 2008
	State Zip Code	Transaction ID: 15834302
	WV 26731-9701	Amount of Each Receipt this Period
f contributing mmittee.	C	250.00
ocnital	Occupation Chief Executive Officer	
General ify) ▼	Aggregate Year-to-Date ▼ 250.00	
First, Middle Initial) ler		Date of Receipt
2010 Military Road		0 8 2 1 2 0 0 8
	State Zip Code	Transaction ID: 15834308
	WV 25701-5339	Amount of Each Receipt this Period
f contributing mmittee.	C	500.00
Hospital	President and Chief Executive Officer	<u>, </u>
General	Aggregate Year-to-Date ▼ 500.00	
ify) ▼		792.00
r	Hospital General	Hospital Occupation President and Chief Executive Officel Aggregate Year-to-Date General FOO 00

ITEMIZED R		ements may i	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions
or for commercial p	ourposes, other than using the na MMITTEE (In Full) ospital Association PAC	ime and addr	ess of any political committee to	solicit contributions from such committee.
Full Name (Las Mr. Bruce McCly Mailing Address				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Masontown</u>		State WV	Zip Code 26542-8602	Transaction ID: 15834309 Amount of Each Receipt this Period
federal political		C		500.00
Name of Employ West Virginia L Hospitals Receipt For: Primary Other (sp	General	President	and Chief Executive Officer /ear-to-Date ▼ 500.00	
B. Mr. Tommy H M	t, First, Middle Initial) ullins s 701 Madison Avenue			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Madison FEC ID numbe federal political	r of contributing committee.	State WV	Zip Code 25130-1669	Transaction ID: 15834310 Amount of Each Receipt this Period 250.00
Name of Emplo Boone Memoria Receipt For: Primary Other (sp	General	Occupation Administra Aggregate	ator ⁄ear-to-Date ▼ 250.00	
Full Name (Las Ms. Dorothy Oal Mailing Address				Date of Receipt M M
City Morgantown		State WV	Zip Code 26508-0020	Transaction ID: 15834315 Amount of Each Receipt this Period
federal political		С		175.00
Name of Employers Virginia Les Hospitals Receipt For: Primary Other (sp	General		dent and Cheif Nursing Office Vear-to-Date ▼ 250.00	<u>c</u>
SUBTOTAL of R	eceipts This Page (optional)		·····	925.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 93 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Louise McCleery Mailing Address 245 Main Street City	State	Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Colebrook FEC ID number of contributing federal political committee.	NH C	03576-3002	Transaction ID: 15840834 Amount of Each Receipt this Period 350.00
Name of Employer Upper Connecticut Valley Hospital Receipt For: Primary General Other (specify) ▼		n cutive Officer e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ms. Claire L Bowen Mailing Address 243 Elm Street	•		Date of Receipt M M D D Y Y Y Y Y Y Y Y
Clarement	State	Zip Code	Transaction ID: 15840835
Claremont FEC ID number of contributing federal political committee.	C	03743-2099	Amount of Each Receipt this Period 350.00
Name of Employer Valley Regional Hospital	Occupatio Chief Exc	n ecutive Officer	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Gregory J Walker			Date of Receipt
Mailing Address 789 Central Avenue			0 8 2 0 7 Y Y Y Y Y Y Y
City Dover	State NH	Zip Code 03820-2526	Transaction ID: 15840836
FEC ID number of contributing federal political committee.	C	03020*2320	Amount of Each Receipt this Period 350.00
Name of Employer Wentworth-Douglass Hospit- al		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Arthur W Nichols Mailing Address 580 Court Street City Keene FEC ID number of contributing federal political committee. Name of Employer Cheshire Medical Center Receipt For: Primary General Other (specify)	State Zip Code NH 03431-1718 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y O 8 2 0 0 8 Transaction ID: 15840837 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Douglas F Dean, , Jr. Mailing Address One Elliot Way City Manchester FEC ID number of contributing federal political committee. Name of Employer Elliot Hospital Receipt For: Primary General Other (specify)	State Zip Code NH 03103-3599 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M A 20 2008 Transaction ID: 15840838 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Mr. Perry Hanson Mailing Address 1660 S. Highway City Minneapolis FEC ID number of contributing federal political committee. Name of Employer Partners Healthcare Consulting, Inc. Receipt For: Primary General Other (specify)	State Zip Code MN 55416 C Occupation Principal and Director Aggregate Year-to-Date ▼ 750.00	Date of Receipt M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	· • • • • • • • • • • • • • • • • • • •	1750.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and St	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	name and add	dress of any political committee to	solicit contributions from such committee.
∠ 4 .	Full Name (Last, First, Middle Initial) Eric Nelson			Date of Receipt
	Mailing Address 6401 France Avenue S	South		0 8 1 8 2 0 0 8
	City	State	Zip Code	Transaction ID: 15840850
	<u>Edina</u>	MN	55435-2104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Fairview Southdale Hospit- al	Occupation Clinical C	n Quality Manager	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
- В.	Full Name (Last, First, Middle Initial) Ms. Mary Ellen Wells			Date of Receipt
	Mailing Address 1095 Highway 15 South	th		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15840852
	Hutchinson	MN	55350-5000	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Hutchinson Area Health Ca- re	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) Mr David Molmen			Date of Receipt
	Mailing Address 1000 South Columbia I	Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15840897
	Grand Forks	ND	58201-4032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		310.00
	Name of Employer Altru Health System	Occupation Chief Op	n erating Officer	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 310.00	
	SUBTOTAL of Receipts This Page (optional)			1060.00
┟				-

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 93 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Gaspare Calvaruso Mailing Address 901 Wycliffe Court City	State	Zip Code	Date of Receipt M
Caseyville FEC ID number of contributing federal political committee.	C	62232-2845	Amount of Each Receipt this Period 250.00
Name of Employer SSM St. Joseph Health Center Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Presiden Aggregate		
Full Name (Last, First, Middle Initial) Mr. Michael L. Graue Mailing Address 303 Lake View Drive)		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State MO	Zip Code 63090-5387	Transaction ID: 15841474 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer SSM Health Care - St. Lou- is Receipt For: ☐ Primary ☐ General Other (specify) ▼		n t, South Group Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. William M. Jennings	'		Date of Receipt
Mailing Address 17725 Wilding Place	e Drive		08 21 2008
City Chesterfield	State MO	Zip Code 63005-4279	Transaction ID: 15841484 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer SSM St. Mary's Health Cen- ter Receipt For:	Occupatio Presiden	t	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
SUBTOTAL of Receipts This Page (optional))	800.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 93 (check only one) X 11a 11b 11c 12
Any information copied from such Reports	and Statements may not be sold or used by any persoing the name and address of any political committee to	13 14 15 16 17
NAME OF COMMITTEE (In Full) American Hospital Association P	7.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		Date of Descipt
Dr. Steven P. Johnson, Ph.D. Mailing Address 16857 Kehrsbroo	ke Court	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15841486
Chesterfield	MO 63005-6514	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer SSM Health Care - St. Lou- is	Occupation Executive VP, North Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Patrice L. Komoroski, R.N., Ph.D	I	Date of Receipt
Mailing Address 65 West Meath F	Ring	08 21 7 2008
City	State Zip Code	Transaction ID: 15841487
Weldon Spring	MO 63304-0595	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	137.50
Name of Employer SSM DePaul Health Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Verna Meacham		Date of Receipt
Mailing Address 1211 Silver Fern	Drive	08 21 7 2008
City	State Zip Code MO 63367-4775	Transaction ID: 15841494
Lake St Louis FEC ID number of contributing federal political committee.	MO 63367-4775	Amount of Each Receipt this Period 190.00
Name of Employer SSM St. Joseph Hospital West	Occupation Interim President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 302.50	
SUBTOTAL of Receipts This Page (option	onal)	627.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 35 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be name and address o	e sold or used by any perso f any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. James M. Sanger			Date of Receipt
Mailing Address 58 Stoneyside Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	p Code	Transaction ID: 15841501
Saint Louis	MO 6	3132-4122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer SSM Health Care - St. Lou-	Occupation President & Ch	nief Executive Officer	
is Receipt For:	Aggregate Year-t		+
Primary General Other (specify) ▼	riggiogale Toal-t	500.00	
Full Name (Last, First, Middle Initial) Mr. Lester P Schindel			Date of Receipt
Mailing Address 150 York Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	p Code	Transaction ID: 15841513
Stoughton		2072-1829	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer New England Sinai Hospital and Rehabil	Occupation President and	Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker			Date of Receipt
Mailing Address 7800 South Eagle Road	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Z	p Code	Transaction ID: 15845128
Columbia	MO 6	5203-9017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		38.90
Name of Employer Missouri Hospital Associa- tion	Occupation Senior VP, Cor	mmc. & Health Improv	ement
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 311.20	
SUBTOTAL of Receipts This Page (optional)			888.90

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine Mailing Address 12675 Riviera Heights City Holts Summit	Road State Zip Code MO 65043-2039	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President, Health Policy Aggregate Year-to-Date 888.96	111.12
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 611 Belridge Drive P.O. Box 60 City Jefferson City FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify)	State Zip Code MO 65109-0755 C Occupation Sr. Vice President, Governmental Rel Aggregate Year-to-Date 311.20	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff Mailing Address 5119 Coventry Waye City Jefferson City FEC ID number of contributing	State Zip Code MO 65101-8284	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify)	Occupation Senior Vice President & CFO Aggregate Year-to-Date 311.20	38.90
SUBTOTAL of Receipts This Page (optional)	>	188.92

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 93 (check only one) X 11a
or for	oformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	tatements may name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. <u>M</u> r	Il Name (Last, First, Middle Initial) Marc D. Smith ailing Address 5612 Tanner Bridge Ro	oad		Date of Receipt
Cit Je		State MO	Zip Code 65101-8275	Transaction ID: 15845148 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		111.12
<u>tio</u>	ame of Employer ssouri Hospital Associa- n sceipt For: Primary General Other (specify)		and Chief Executive Office Year-to-Date ▼ 888.96	r]
B. Mr	Il Name (Last, First, Middle Initial) John W Bluford ailing Address 2301 Holmes Street			Date of Receipt 0 8 2 2 2 0 0 8
Cit	ty	State	Zip Code	Transaction ID: 15845153
FE	ansas City C ID number of contributing deral political committee.	MO C	64108-2640	Amount of Each Receipt this Period 1000.00
<u>pit</u>	ame of Employer uman Medical Center-Hos- al Hill seceipt For: Primary Other (specify)		and Chief Executive Office Year-to-Date ▼ 1000.00	r]
	II Name (Last, First, Middle Initial) Mel N Bass			Date of Receipt
	ailing Address 3210 Grace Street, NW	/ #310		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	•	State	Zip Code	Transaction ID: 15866634
FE	ashington C ID number of contributing deral political committee.	C	20007-3672	Amount of Each Receipt this Period 350.00
<u>ica</u>	ame of Employer anderbilt University Med- al Center		ederal Relations	
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
SUB	TOTAL of Receipts This Page (optional)			1461.12

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A or	ny information copied from such Reports and S for commercial purposes, other than using the	statements may name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
A.	Full Name (Last, First, Middle Initial) Mr. Daniel Griess			Date of Receipt
	Mailing Address 2101 Box Butte Avenu			08 25 2008
	City Alliance	State NE	Zip Code 69301	Transaction ID: 15866635 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Box Butte General Hospital	Occupation Chief Exe	cutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
 3.	Full Name (Last, First, Middle Initial) Mr. Roger J Reamer Mailing Address 300 N. Columbia	l		Date of Receipt
				08 26 2008
	City Seward	State NE	Zip Code 68434	Transaction ID: 15866637 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00404	350.00
	Name of Employer Memorial Health Care Syst- ems	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
—).	Full Name (Last, First, Middle Initial) Mr. Greg Kiser	1		Date of Receipt
	Mailing Address P O Box 769			0 8 2 6 2 0 0 8
	City	State	Zip Code	Transaction ID: 15866638
	Louisa FEC ID number of contributing federal political committee.	C	41230-0769	Amount of Each Receipt this Period 600.00
	Name of Employer Three Rivers Medical Cent- er	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 600.00	
5	SUBTOTAL of Receipts This Page (optional)	1		1300.00
	OTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 93 (check only one) X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert R. Goodin		Date of Receipt
Mailing Address 3012 Lightheart Rd		08 26 2008
City	State Zip Code	Transaction ID: 15866641
Louisville	KY 40222	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Norton Hospital	Occupation Board Member	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Mark J Neff, , CHE		Date of Receipt
Mailing Address 222 Medical Circle		08 26 2008
City	State Zip Code	Transaction ID: 15866642
Morehead	KY 40351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer St. Claire Regional Medic- al Center	Occupation President and Chief Executive Office	or
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	7
Full Name (Last, First, Middle Initial)		-
Mr. James H Taylor, , FACHE		Date of Receipt
Mailing Address 530 South Jackson St	reet	08 26 2008
City	State Zip Code	Transaction ID: 15866643
<u>Louisville</u>	KY 40202-1675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1200.00
Name of Employer University of Louisville Hospital	Occupation President and Chief Executive Office	er .
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1200.00	
SUBTOTAL of Receipts This Page (optional)		3200.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Kevin Nokels Mailing Address 11111 South 84th Stree City Papillion	et State NE	Zip Code 68046-4122	Date of Receipt M M
	FEC ID number of contributing federal political committee. Name of Employer Alegent-Health Midlands	C		350.00
	Alegent-Health Midlands Hospital Receipt For: Primary General Other (specify)	Vice Pre	sident and Chief Operating C e Year-to-Date ▼ 350.00	Off
3.	Full Name (Last, First, Middle Initial) Mr. David W Tower, , FACHE Mailing Address P O Box 912			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 15866647
	Wolfeboro FEC ID number of contributing federal political committee.	C	03894-0912	Amount of Each Receipt this Period 500.00
	Name of Employer Huggins Hospital	Occupation Presiden		
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 500.00	
- :.	Full Name (Last, First, Middle Initial) Mr. Andrew Patterson			Date of Receipt
	Mailing Address 80 Highland Street			08 25 7 2008
	City Laconia	State NH	Zip Code 03246-3235	Transaction ID: 15866648
	FEC ID number of contributing federal political committee.	C	03240-3233	Amount of Each Receipt this Period 500.00
	Name of Employer LRGhealthcare	Occupation Director,	n Contracting & Corp. Compli	ar
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1350.00
	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 93 (check only one) X
	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
4 .	Full Name (Last, First, Middle Initial) Mr. James F Hanko Mailing Address 1300 Anne St. NW		Date of Receipt 0 8 2 0 2 0 0 8
	City Bemidji FEC ID number of contributing	State Zip Code MN 56601	Transaction ID: 15867107 Amount of Each Receipt this Period
	Name of Employer North Country Regional Hospital Receipt For: Primary Other (specify)	Occupation President and Chief Executive Office Aggregate Year-to-Date ▼ 562.50	187.50 r
	Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa Mailing Address 301 Becker Avenue S	w	Date of Receipt 0 8 2 0 2 0 0 8
	City	State Zip Code	Transaction ID: 15867111
	Willmar	MN 56201-3395	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Rice Memorial Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	450.00	
_	Full Name (Last, First, Middle Initial) Ms Cindy Morrison	I	Date of Receipt
	Mailing Address 2009 East Edgewood	Road	08 20 2008
	City	State Zip Code	Transaction ID: 15867148
	Sioux Falls FEC ID number of contributing federal political committee.	SD 57103-4607	Amount of Each Receipt this Period 75.00
	Name of Employer Sanford Health	Occupation Senior Vice President for Public Police	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
	SUBTOTAL of Receipts This Page (optional) .		412.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Mr. Larry A. Schulz Mailing Address 7650 Edwinboroug Suite 200	n Way	Date of Receipt 0 8 2 0 2 0 8		
City	State Zip Code	Transaction ID: 15867150		
Minneapolis	MN 55435-5978	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Catholic Health Initiativ- es	Occupation Sr. Vice President, Operations			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Ms. Linda Lang Mailing Address 4000 Kruse Way P	1200 #2.100	Date of Receipt		
	·			
City	State Zip Code	Transaction ID: 15867215		
Lake Oswego FEC ID number of contributing federal political committee.	OR 97035-2543	Amount of Each Receipt this Period 350.00		
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Director of Rural Health Services			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) Ms. Gwen Dayton		Date of Receipt		
Mailing Address 12781 SW Terravio	ew Drive	0 8 2 5 2 0 0 8		
City	State Zip Code	Transaction ID: 15867216		
Tigard FEC ID number of contributing federal political committee.	OR 97224-0703	Amount of Each Receipt this Period 250.00		
Name of Employer Oregon Association of Hospitals & Heal	Occupation Vice President & General Counsel			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (option	al)	850.00		

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 93 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may n the name and addre	ot be sold or used by any personant of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy			Date of Receipt
Mailing Address 14432 SE Eastgate	Way, Ste 300		08 / 25 / 2008
City Bellevue	State WA	Zip Code 98007-6493	Transaction ID: 15867217 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0007 0400	500.00
Name of Employer PeaceHealth	Occupation President a	and Chief Executive Office	 r
Receipt For: Primary General Other (specify) ▼	- 	ear-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. James A. Diegel Mailing Address 2500 Northeast Neff	Road		Date of Receipt
			08 25 2008
City Bend	State OR	Zip Code 97701-6015	Transaction ID: 15867228 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07701 0010	250.00
Name of Employer Cascade Healthcare Commun- ity	Occupation President a	and CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr Kent L. Brown			Date of Receipt
Mailing Address 3894 Cherry Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Medford	State OR	Zip Code	Transaction ID: 15867229
FEC ID number of contributing federal political committee.	C	97504-8332	Amount of Each Receipt this Period 1530.00
Name of Employer Rogue Valley Medical Cent- er	Occupation Chief Oper	ating Officer	_
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 1530.00	
SUBTOTAL of Receipts This Page (optional)		2280.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 93 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG		, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. Russ Reinhard			Date of Receipt
Mailing Address 34514 S Elliott Roa	ıd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Woodburn	State OR	Zip Code 97071-8702	Transaction ID: 15867230
FEC ID number of contributing federal political committee.	C	97071-8702	Amount of Each Receipt this Period 1350.00
Name of Employer Willamette Falls Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 1350.00	
Full Name (Last, First, Middle Initial) Mr. Norman F Gruber			Date of Receipt
Mailing Address 4768 Circuit Rider	Lane		08 25 2008
City Salem	State OR	Zip Code 97302-9798	Transaction ID: 15867231
FEC ID number of contributing federal political committee.	C	37302-9790	Amount of Each Receipt this Period 375.00
Name of Employer Salem Hospital	Occupation	n t and Chief Executive Office	_ r
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. James A Wathen			Date of Receipt
Mailing Address 900 11th Street SE			0 8 2 5 2 0 0 8
City	State OR	Zip Code	Transaction ID: 15867232
Bandon FEC ID number of contributing federal political committee.	C	97411-9114	Amount of Each Receipt this Period 1840.00
Name of Employer Southern Coos Hospital and Health Cent		ecutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1840.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		3565.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e (crieck only one)
A	r for commercial purposes, other than using th	Statements may not be sold or used by an e name and address of any political comm	y person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
/	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Gordon Ensley		Date of Receipt
	Mailing Address 700 South 'J' Street	7.0	08 25 2008
	City Lakeview	State Zip Code OR 97630-1679	Transaction ID: 15867233 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Lake District Hospital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	00
 3.	Full Name (Last, First, Middle Initial) Mrs. Rosemari Davis Mailing Address 2700 SE Stratus Aver		Date of Receipt
			08 25 2008
	City McMinnville	State Zip Code OR 97128-6255	Transaction ID: 15867234 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	557.00
	Name of Employer Willamette Valley Medical Center	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 557.	00
_ ;.	Full Name (Last, First, Middle Initial) Mr. Larry Bowe		Date of Receipt
	Mailing Address 1001 Providence Driv)	0 8 25 Y Y Y Y Y
	City Newberg	State Zip Code OR 97132-7485	Transaction ID: 15867235
	FEC ID number of contributing federal political committee.	C 97132-7465	Amount of Each Receipt this Period 265.00
	Name of Employer Providence Newberg Medical Center	Occupation Chief Executive, Yamhill Service	e Area
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 265.	00
Γ	SUBTOTAL of December This Dage (optional)		1122.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 93 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. William E Winter			Date of Receipt
Mailing Address 342 Fairview Street		7.0.1	08 25 2008
City <u>Silverton</u>	State OR	Zip Code 97381-1917	Transaction ID: 15867236 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37301 1017	215.00
Name of Employer Silverton Hospital	Occupation	ative Director	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 215.00	
Full Name (Last, First, Middle Initial) Mr. David C Bigelow			Date of Receipt
Mailing Address P O Box 945			08 25 YYYY 2008
City	State	Zip Code	Transaction ID: 15867237
Newport	OR	97365-4820	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Samaritan Pacific Communi- ties Hospital	Occupation Chief Exe	cutive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Karen Normandin			Date of Receipt
Mailing Address 45 Aquinas			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 15867238
Lake Oswego FEC ID number of contributing federal political committee.	OR	97035-1203	Amount of Each Receipt this Period 1150.00
Name of Employer Oregon Association of Hos-	Occupation		
pitals & Heal Receipt For:	Director	Year-to-Date ▼	
Primary General Other (specify) ▼	7.99.09410	1150.00	
SUBTOTAL of Receipts This Page (optional) .			1665.00
SUBTOTAL of Receipts This Page (optional) . TOTAL This Period (last page this line number		<u> </u>	1665.0

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or f	y information copied from such Reports and or commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Mr. Gary L Brewer			Date of Receipt
	Mailing Address P O Box 1970	01-1-	7'- 0-4-	08 29 2008
	City Glenwood Springs	State CO	Zip Code 81602-1970	Transaction ID: 15867539 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01002-1970	725.00
	Name of Employer Valley View Hospital	Occupation Chief Exe	ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 725.00	
В.	Full Name (Last, First, Middle Initial) Ms. Martie Wisdom	1		Date of Receipt
	Mailing Address P O Box 912			08 29 2008
	City	State	Zip Code	Transaction ID: 15867549
	Rifle	CO	81650-0912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Grand River Hospital Dist- rict	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
 S.	Full Name (Last, First, Middle Initial) Mr. Mark H Shuter			Date of Receipt
	Mailing Address 272 Hospital Road			0 8 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 15870441
	Chillicothe	OH	45601-9031	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Adena Health System	Occupation President	n and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
sı	JBTOTAL of Receipts This Page (optional)			1225.00
	DTAL This Period (last page this line numbe		<u> </u>	

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 93 (check only one) X
or for com	nation copied from such Reports and St mercial purposes, other than using the OF COMMITTEE (In Full) can Hospital Association PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Lyn Mailing City	me (Last, First, Middle Initial) don J Christman Address 203 Bryn Drive	State	Zip Code	Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
	rille number of contributing political committee.	ОН	43023-1503	Amount of Each Receipt this Period 337.50
Hospita Receip F		Occupation President Aggregate		
Mr. Joh	me (Last, First, Middle Initial) n E. Callender Address 2743 Elginfield Road			Date of Receipt 0 8 1 5 2 0 0 8
FEC ID	Arlington Dinumber of contributing political committee.	State OH	Zip Code 43220-4247	Transaction ID: 15870616 Amount of Each Receipt this Period 50.00
Name o	of Employer lospital Association	Occupation Senior Vi	n ice President	
	t For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 250.00	
Ms. Ma	me (Last, First, Middle Initial) ry L. Gallagher Address 155 East Broad Street, 15th Floor			Date of Receipt 0 8 1 5 2 0 0 8
City Colun		State OH	Zip Code 43215-3609	Transaction ID: 15872669 Amount of Each Receipt this Period
FEC ID	0 number of contributing political committee.	C	10210 0000	250.00
Name o Ohio H	of Employer lospital Association	Occupation Vice Pres	n sident & General Counsel	
	t For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOT	AL of Receipts This Page (optional)			637.50

or f	r information copied from such Reports and Sor commercial purposes, other than using the			13 14 15 16 1
- I \	1 1 7	tatements may not be s name and address of a	sold or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
/	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Dominic Prunte			Date of Receipt
	Mailing Address 2814 Bryden Road City	State Zip	Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Columbus		209-2248	Amount of Each Receipt this Period
•	FEC ID number of contributing federal political committee.	C	1 1 1 1	250.00
•	Name of Employer Fairfield Medical Center	Occupation Vice President, I	Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Curt Hohman			Date of Receipt
	Mailing Address 47931 Oak Ridge Place	08 15 2008		
	City	•	Code	Transaction ID: 15873182
	Harrisburg	SD 570	032-8239	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		47.50
	Name of Employer Avera McKennan Hospital and University	Occupation Chief Executive		
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-	Date ▼ 222.50	
	Full Name (Last, First, Middle Initial) Mr. Ronald L Jacobson			Date of Receipt
	Mailing Address 305 South State Stree	08 15 7 2008		
	City	•	Code	Transaction ID: 15873355
	Aberdeen	SD 574	402-4450	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Avera St. Luke's	Occupation Regional Preside		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	Date ▼ 250.00	
SL	JBTOTAL of Receipts This Page (optional)			547.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Becky Nelson Mailing Address P O Box 5039		Date of Receipt
1305 West 18th Street		08 15 2008
City Sioux Falls	State Zip Code SD 57117-5039	Transaction ID: 15875443
FEC ID number of contributing federal political committee.	C 5/11/-5039	Amount of Each Receipt this Period 250.00
Name of Employer Sanford University of Sou- th Dakota Med Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 250.00	_
Full Name (Last, First, Middle Initial) Dr. Charles O'Brien		Date of Receipt
Mailing Address 3033 W Donahue Driv	08 15 2008	
City	State Zip Code	Transaction ID: 15875444
Sioux Falls	SD 57105-0168	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sanford University of Sou-	Occupation President	
th Dakota Med Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr Eugene A Thorn		Date of Receipt
Mailing Address 659 Boulevard		08 15 2008
City	State Zip Code	Transaction ID: 15883194
<u>Dover</u>	OH 44622-2077	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Union Hospital	Occupation Vice President Finance and Chief Fina	l n
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
C C	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Charles Johnston		Date of Receipt
	Mailing Address Box 368	7.0	08 / 06 / 2008
	City Raule Valley	State Zip Code OK 73075-0368	Transaction ID: 15883225
	Pauls Valley FEC ID number of contributing federal political committee.	OK 73075-0368	Amount of Each Receipt this Period 250.00
	Name of Employer Pauls Valley General Hosp- ital	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
 3.	Full Name (Last, First, Middle Initial) Mr. C. Bruce Lawrence Mailing Address 3300 NW Expressway		Date of Receipt
		08 06 2008	
	City	State Zip Code	Transaction ID: 15883227
	Oklahoma City FEC ID number of contributing federal political committee.	OK 73112-4481	Amount of Each Receipt this Period 500.00
	Name of Employer Integris Baptist Medical Center	Occupation President and Chief Operating Officer	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
_).	Full Name (Last, First, Middle Initial) Ms. Barbara Oestmann	1	Date of Receipt
	Mailing Address P O Box 727		0 8 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 15883235
	Alva FEC ID number of contributing federal political committee.	OK 73717-0727	Amount of Each Receipt this Period 500.00
	Name of Employer Share Medical Center	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .		1250.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person ag the name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. David R Stire		Date of Receipt
Mailing Address 3500 East Frank I	<u>'</u>	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 15883238
Bartlesville FEC ID number of contributing federal political committee.	OK 74006-2411	Amount of Each Receipt this Period 250.00
Name of Employer Jane Phillips Medical Cen- ter	Occupation President and Chief Executive Officer	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Stephen Trotter	-	Date of Receipt
Mailing Address 1102 West MacAr	08 06 2008	
City	State Zip Code	Transaction ID: 15883281
Shawnee	OK 74804-1743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Unity Health Center	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan	'	Date of Receipt
Mailing Address 506A East Howell	08 31 2008	
City	State Zip Code	Transaction ID: PR1034595121080
Alexandria	VA 22301-1216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (option	nal)	560.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and Stror commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	08 31 2008
	City	State Zip Code	Transaction ID: PR1045726221080
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP & Chief Washington Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	702.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	08 / 31 / 2008	
	City	State Zip Code	Transaction ID: PR1113464221080
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	252.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	08 31 2008	
	City	State Zip Code	Transaction ID: PR1143013021080
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.17
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Legislative Assistant	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 235.17	P/R Deduction (\$14.39 Bi-Weekly)
	SUBTOTAL of Receipts This Page (optional)		202.17

ľ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
	any information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. David L. Allen			Date of Receipt
	Mailing Address 325 Seventh Street, NV	N		08 31 2008
	City	State	Zip Code	Transaction ID: PR1234662821080
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Associat	n e Director, Media Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi- Weekly)
_ s.	Full Name (Last, First, Middle Initial) Ms. Mary Meadows			Date of Receipt
	Mailing Address One North Franklin	08 31 7 2008		
	City	State	Zip Code	Transaction ID: PR1260472921080
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Organization of	Occupatio	n of Professional Practice	
	Nurse Executi Receipt For:		e Year-to-Date	
	Primary General Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Michelle Marie Mathy			Date of Receipt
	Mailing Address 1660 Lanier PL Apt. 4	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR1300853721080
	Washington	DC	20009-2938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Washingt	. ' '	Manager/PAC Coordinator	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	D/D Deduction (644.00 D)
	Other (specify) ▼		252.00	P/R Deduction (\$14.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)			126.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
, C	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Alex White, Jr.		Date of Receipt
	Mailing Address One North Franklin		08 / 08 / 2008
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1339349921080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	174.00
	Name of Employer American Hospital Associa- tion	Occupation Account Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1044.00	P/R Deduction (\$58.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Frances Margolin		Date of Receipt
	Mailing Address One North Franklin		08 31 YYYYY 2008
	City	State Zip Code	Transaction ID: PR1347702721080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Operatinos HRET	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin	08 31 2008	
	City	State Zip Code	Transaction ID: PR1347703421080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation VP, Operations and Account Services	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Ri
	Other (specify)	360.00	P/R Deduction (\$20.00 Bi- Weekly)
			294.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin City	State Zip Code	0 8 3 1 2 0 0 8 Transaction ID: PR1347703621080
	<u>Chicago</u>	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Catherine D. Sewell		Date of Receipt
	Mailing Address One North Franklin	08 31 2008	
	City	State Zip Code	Transaction ID: PR1347708421080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	159.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	583.00	P/R Deduction (\$53.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		08 31 2008
	City	State Zip Code	Transaction ID: PR1347791021080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Operations, AONE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		261.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 93 (check only one) X 11a
A C	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. John Slotman			Date of Receipt
_	Mailing Address 325 Seventh Street, NV Suite 700			08 / 31 / 2008
	City Washington	State DC	Zip Code 20004-2802	Transaction ID: PR1384065321080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1 1	60.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For: Primary General Other (specify) ▼		n e Director, Federal Relations e Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
3.	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake Mailing Address One North Franklin			Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 8 Transaction ID: PR1492459921080
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.00
	Name of Employer American Hospital Associa- tion-Chicago		e Executive Director - ASHH	RA
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 216.00	P/R Deduction (\$18.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Linda Fishman			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		08 / 31 / 2008
	City	State	Zip Code	Transaction ID: PR327629121080
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Pres	n sident Federal Relations	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			231.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
	Mailing Address 11004 petersborough I		08 31 2008
	City	State Zip Code	Transaction ID: PR327745921080
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	702.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
	Mailing Address 122 N. Greenwood Ave	08 31 YYYY 2008	
	City	State Zip Code	Transaction ID: PR327771621080
	Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	252.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
	Mailing Address One North Franklin	08 31 YYYYY 2008	
	City	State Zip Code	Transaction ID: PR327777221080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	<u> </u>	201.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
Mailing Address 1022 S. Harvey Avenu		08 / 01 / 2008
City Oak Park	State Zip Code IL 60304-2132	Transaction ID: PR327777821080 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
Mailing Address 1003 Kimberly Place		08 31 2008
City	State Zip Code	Transaction ID: PR327801721080
Great Falls	VA 22066-1546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	08 / 31 / 2008
City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327812021080 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer American Organization of Nurse Executi	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optional)		237.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 93 (check only one) X 11a
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Stree		08 / 31 / 2008
	City	State Zip Code VA 22205-3408	Transaction ID: PR327831721080
	Arlington FEC ID number of contributing federal political committee.	VA 22205-3408	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
	Mailing Address One North Franklin Str	08 31 2008	
	City	State Zip Code	Transaction ID: PR327846221080
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings & Travel Se	rv
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	08 31 2008	
	City Washington	State Zip Code DC 20008-2614	Transaction ID: PR327851921080
	FEC ID number of contributing federal political committee.	C 20000-2014	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy Development	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		162.00

ITEMIZED	LE A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or for commerc	copied from such Reports and Stal purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	tatements may name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	_ast, First, Middle Initial)			Date of Receipt
Mailing Add	ress 325 Seventh Street, N' Suite 700	W		08 31 2008
City <u>Washingto</u>	on	State DC	Zip Code 20004-2818	Transaction ID: PR327858021080 Amount of Each Receipt this Period
	ber of contributing cal committee.	C		117.00
tion-Washin Receipt For: Prima		, '	n sident, Political Affairs • Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi-Weekly)
Mr. John F. E	Last, First, Middle Initial) Barry ress One North Franklin			Date of Receipt 0 8 3 1 2 0 0 8
City Millis		State MA	Zip Code	Transaction ID: PR327877821080
FEC ID num	ober of contributing cal committee.	C	60606-3436	Amount of Each Receipt this Period 117.00
tion-Chicago Receipt For: Prima	óspítal Associa-)	,	Executive e Year-to-Date 702.00	P/R Deduction (\$39.00 Bi-Weekly)
Full Name (I Mr. George F Mailing Add		urt		Date of Receipt
City	#3002	State	Zip Code	0 8 3 1 2 0 0 8 Transaction ID: PR327895721080
<u>Chicago</u> FEC ID num	nber of contributing	IL C	60602-4750	Amount of Each Receipt this Period 60.00
	ployer ospital Associa-	Occupatio		00.00
tion-Chicago Receipt For: Prima		Vice Pres	e Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi-Weekly)
SUPTOTAL	f Receipts This Page (optional)			294.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (crieck drilly drie)
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Judy Williams		Date of Receipt
	Mailing Address One North Franklin Str		08 / 031 / 2008
	City Chicago	State Zip Code IL 60606	Transaction ID: PR327918921080
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 51.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Director, Membership Admin.	
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 221	I I WEEKIV)
. –	Full Name (Last, First, Middle Initial) Mr. Richard J Umbdenstock		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		08 / 31 / Y Y Y Y Y Y
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR328132821080
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
	Mailing Address 204 7th Ave		0 8 / 3 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328136921080
	La Grange FEC ID number of contributing federal political committee.	IL 60525-6406	Amount of Each Receipt this Period 117.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Re	elations
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		285.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 93 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
Mailing Address One North Franklin Str		08 / 31 / 2008
City <u>Chicago</u>	State Zip Code IL 60606	Transaction ID: PR328174921080
FEC ID number of contributing federal political committee.	C 60006	Amount of Each Receipt this Period 54.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, SHSMD Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date V	P/R Deduction (\$18.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
Mailing Address 5545 North Wayne		08 31 7 2008
City	State Zip Code	Transaction ID: PR328223821080
Chicago	IL 60640-1318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	702.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
Mailing Address 13106 Vingle Lane		08 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR328224921080
Silver Spring	MD 20906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi- Weekly)
CURTOTAL of Descripts This Descriptionally		288.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(Crieck only one)
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commi	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		08 31 2008
	City Eagle	State Zip Code ID 83616-5369	Transaction ID: PR328241421080
	FEC ID number of contributing federal political committee.	C 83010-3309	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.0	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack	<u> </u>	Date of Receipt
	Mailing Address 3475 North Venice Str	08 / 31 / 2008	
	City	State Zip Code	Transaction ID: PR328260921080
	Arlington	VA 22207-4446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	702.0	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade	I	Date of Receipt
	Mailing Address 1221 Cavalier Road		08 31 2008
	City	State Zip Code	Transaction ID: PR328310421080
	Arnold	MD 21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice President, Communica	tions
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.0	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1	297.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 93 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen			Date of Receipt
	Mailing Address 1001 N. Potomac Stre	eet		0 8 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328312721080
	Arlington	VA	22205-1629	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		117.00
	Name of Employer American Hospital Associa-	Occupation	ce President	
	tion-Washingt Receipt For:	1	Year-to-Date ▼	
	Primary General Other (specify) ▼		702.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW		08 31 YYYY 2008
	City	State	Zip Code	Transaction ID: PR328341821080
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		117.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, F	Political Action & Grassroot	
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		702.00	P/R Deduction (\$39.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero	1		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	1W		0 8 3 1 2 0 0 8
	City	State	Zip Code	Transaction ID: PR328490121080
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.86
	Name of Employer American Hospital Associa- tion-Washingt	- '	iate Director	
	Receipt For: Primary General	Aggregate '	Year-to-Date ▼	D/D D . I . // // // // 20 7: ***
	Other (specify)		273.16	P/R Deduction (\$9.62 Bi-W- eekly)
Г	SUBTOTAL of Receipts This Page (optional)			262.86

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			08 31 YYYYY 2008
	City Yardley	State PA	Zip Code 19067-5736	Transaction ID: PR328511821080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		117.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation Regional Aggregate	Executive Year-to-Date ▼	P/R Deduction (\$39.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell		0 0 0 0 0 0 0	Date of Receipt
	Mailing Address 1501 N. Harrison Stre	et		08 31 YYYY 2008
	City	State	Zip Code	Transaction ID: PR328512021080
	Arlington FEC ID number of contributing federal political committee.	C	22205-2726	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice Pres	ident, Media Relations	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey	<u> </u>		Date of Receipt
	Mailing Address One North Franklin St	reet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR329013421080
	Chicago FEC ID number of contributing federal political committee.	C	60606	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	, '	Psychiatric and Substance	Ab
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)	I		237.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 93 (check only one) X 11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address 1 North Franklin SAtre		08 / 31 / Y Y Y Y Y Y Y
	City Chicago	State Zip Code IL 60614	Transaction ID: PR329071321080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	117.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & COO, Leadership & Busin	ness
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	N	08 / 31 / 2008
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084421080
	FEC ID number of contributing federal political committee.	C 20004-2018	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Executive E	Br
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	rd South	08 31 2008
	City	State Zip Code	Transaction ID: PR329215721080
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 117.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		294.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 93 (check only one) X
Ai or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial)			1
•	Mr. John Evans Mailing Address One North Franklin Stru	eet		Date of Receipt
	City	State	Zip Code	0 8 3 1 2 0 0 8 Transaction ID: PR329342621080
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		42.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation CFO	ı	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris			Date of Receipt
	Mailing Address 1136 W. Farwell Ave.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR329654221080
	Chicago	<u>IL</u>	60626-3861	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Chicago		e Director, ASDVS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman			Date of Receipt
	Mailing Address One North Franklin			08 31 7 2008
	City	State	Zip Code	Transaction ID: PR330343321080
	Chicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Associa- tion-Chicago		e Services Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
5	SUBTOTAL of Receipts This Page (optional)			144.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 69 / 93 (check only one) X
Any or fo	information copied from such Reports and or commercial purposes, other than using the	Statements may not be name and address	pe sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
\	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt			Date of Receipt
N	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago		Zip Code 60606-3436	Transaction ID: PR330411621080 Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	C	00000-3430	60.00
N /	Name of Employer American Hospital Associa- ion-Chicago	Occupation Associate Re	gional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron			Date of Receipt
N	Mailing Address 325 Seventh Street, N Suite 700	IW		08 31 2008
	City		Zip Code	Transaction ID: PR330465221080
7	<u> Washington</u>	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		42.00
<u>t</u>	Name of Employer American Hospital Associa- ion-Washingt	Occupation Asst. General	Counsel	
F	Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 238.00	P/R Deduction (\$14.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca			Date of Receipt
N	Mailing Address 4960 138th Cricle We	st		08 31 2008
	Dity		Zip Code	Transaction ID: PR330475421080
	Apple Valley	MN	55124	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		117.00
<u>t</u>	Name of Employer American Hospital Associa- ion-Chicago Receipt For:	Occupation Regional Exe		
·	Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 702.00	P/R Deduction (\$39.00 Bi- Weekly)
en	BTOTAL of Receipts This Page (optional) .	l		219.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
0	any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
,	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
	Mailing Address 6109 North 9th Road		08 31 2008
	City Arlington	State Zip Code VA 22205-1609	Transaction ID: PR330534321080
	FEC ID number of contributing federal political committee.	C 22205-1009	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial)		Weekly)
	Mr. Gene O'Dell Mailing Address One North Franklin		Date of Receipt M M D D Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330547721080
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address 172 Atteridge		08 7 31 7 9 9 8
	City	State Zip Code	Transaction ID: PR330549221080
	Lake Forest FEC ID number of contributing federal political committee.	IL 60045-1715	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	_	180.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 93 (check only one) X
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements mag e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u></u>	Full Name (Last, First, Middle Initial) Mr. Walter J. Reiter			Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W		08 31 2008
	City <u>Washington</u>	State DC	Zip Code 20004-2818	Transaction ID: PR330776121080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary Other (specify)		vocacy & Member Communi • Year-to-Date ▼ 360.00	cations P/R Deduction (\$20.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq. Mailing Address 1101 N. Kentucky Stre	eet		Date of Receipt
	City	State	Zip Code	08 31 2008
	Arlington	VA	22205-3515	Transaction ID: PR331278821080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Director,	n State Issues Forum	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush			Date of Receipt
	Mailing Address 26 West Glendale Ave).		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331304221080
	Alexandria	VA	22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	, '	n Advocacy and Public Policy e Year-to-Date ▼	Ор
	Primary General Other (specify) ▼	53 13411	360.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		162.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 93 (check only one) X 11a
A or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			08 31 2008
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR331379121080 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004 2010	42.00
	Name of Employer American Organization of Nurse Executi		Federal Relations & Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		08 / 31 / Y Y Y Y Y Y 2008
	City	State DC	Zip Code	Transaction ID: PR331386921080
	Washington FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period 43.14
	Name of Employer American Hospital Associa- tion-Washingt		ssociate Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 235.04	P/R Deduction (\$14.38 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Sr.			Date of Receipt
	Mailing Address PO Box 15587			0 8 3 1 2 0 0 8
	City	State	Zip Code	Transaction ID: PR331416021080
	Austin	TX	78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		174.00
	Name of Employer American Hospital Associa- tion	_ <u> </u>	Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1044.00	P/R Deduction (\$58.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			259.14

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 93 (check only one) X 11a 11b 11c 12 15 16 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any persor ename and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
Mailing Address 521 Great Falls St.		08 / 31 / 2008
City	State Zip Code	Transaction ID: PR331533221080
Falls Church	VA 22046-2613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	702.00	P/R Deduction (\$39.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy	<u>I</u>	Date of Receipt
Mailing Address One North Franklin		08 31 YYYY 2008
City	State Zip Code	Transaction ID: PR346168121080
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASHRM	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	252.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Kristin Welsh	<u> </u>	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	0 8 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR517619721080
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Relat	ti
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	702.00	P/R Deduction (\$39.00 Bi- Weekly)
	······	276.00

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pe name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson		Date of Receipt
	Mailing Address 325 Seventh Street, N	N	08 31 2008
	City	State Zip Code	Transaction ID: PR566280921080
	Washington	DC 20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	71.43
	Name of Employer American Hospital Associa-	Occupation	
	tion-Washingt Receipt For:	Associate Director, Federal Relatio Aggregate Year-to-Date ▼	inis
	Primary General Other (specify) ▼	309.53	P/R Deduction (\$23.81 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
-	Mailing Address 606 S. Royal St.		08 31 2008
	City	State Zip Code	Transaction ID: PR766023721080
	Alexandria	VA 22314-4142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Senior Associate Director, Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	360.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	N	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR801366321080
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Dir. Policy Develo	ppme
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D D 1 1 1 2 (\$11.00 D)
	Other (specify) ▼	252.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ.	SURTOTAL of Receints This Page (ontional)	<u> </u>	173.43

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 93 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700		08 31 2008
City <u>Washington</u>	State Zip Code DC 20004-2818	Transaction ID: PR876637221080 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	08 31 2008
City	State Zip Code	Transaction ID: PR936292321080
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer American Hospital Associa-	Occupation Director of Operations	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	252.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. David A. Strickland	<u> </u>	Date of Receipt
Mailing Address One N. Franklin Street		08 31 2008
City	State Zip Code	Transaction ID: PR939603921080
Chicago	IL 60606	Amount of Each Receipt this Period
EEO ID accomplisation of a controller of	C	42.00
FEC ID number of contributing federal political committee.		
Federal political committee. Name of Employer American Organization of Nurse Executi	Occupation Director of Operations	_
federal political committee. Name of Employer American Organization of	Occupation	P/R Deduction (\$14.00 Bi-Weekly)
Name of Employer American Organization of Nurse Executi Receipt For: Primary General	Occupation Director of Operations Aggregate Year-to-Date 252.00	P/R Deduction (\$14.00 Bi-Weekly)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 93 (check only one) 11a 11b 11c X 12 13 14 15 16 17
A .	Any information copied from such Reports and Staten or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City	nents may not be sold or used by any person and address of any political committee to the sold of the	Date of Receipt Date of Receipt Transaction ID: 15818301
_	Name of Employer Committee.	CA 95814 C C00237495 Decupation Aggregate Year-to-Date ▼ 70000.00	Amount of Each Receipt this Period 20000.00
B.	Name of Employer C	State Zip Code TX 78761-5587 C C00301325 Decupation Aggregate Year-to-Date ▼ 48000.00	Date of Receipt M M

SUBTOTAL of Receipts This Page (optional)	•	33000.00
TOTAL This Period (last page this line number only)		33000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 93 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW City	State	Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
Washington FEC ID number of contributing federal political committee.	C	20005	Amount of Each Receipt this Period 467.42
Name of Employer Receipt For: Primary General Other (specify) ▼	Aggregate Aggregate	Year-to-Date ▼	Interest

SUBTOTAL of Receipts This Page (optional)	•	467.42
TOTAL This Period (last page this line number only)	<u> </u>	467.42

IT			arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMEN	ITS for each	category of the Summary Page	(check onl)	y one) 22 X 23 24 25 28a 28b 28c 29 1
	y Information copied from such Reports or commercial purposes, other than usi				for the purpose of soliciting contributions
<u>)</u>	NAME OF COMMITTEE (In Full) American Hospital Association F		ass of any political	Committee to so	incli contributions from such committee
	Full Name (Last, First, Middle Initial) Moran For Kansas				Transaction ID: 15808600 Date of Disbursement
	Mailing Address P.O. Box 1151				08 08 7 04 7 2008
	City Hays	State KS	Zip Code 67601		Amount of Each Disbursement this Perio
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r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Norm Coleman For U.S. Senate Mailing Address 1412 Energy Park Drive #11 City State Zip Code MN 55108 Purpose of Disbursement Contribution Contribution Condidate Name Sen. Norm Coleman Office Sought: House President State: MN District: Full Name (Last, First, Middle Initial) Boucher For Congress Committee Mailing Address PO Box 2000 City State Zip Code Other (specify) ▼ Transaction ID: 15873457 Date of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought: X House President State: VA District: 09 Full Name (Last, First, Middle Initial) Condidates Name Rep. Rick Middle Initial) State: VA District: 09 Full Name (Last, First, Middle Initial) Condidates Name Rep. Righ III Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Transaction ID: 15873457 Date of Disbursement Initial Disbursement Tor: 2008 Transaction ID: 15873457 Date of Disbursement Initial Disbu		Detailed Summary Page		
American Hospital Association PAC Full Name (Last, First, Middle Initial) Norm Coleman For U.S. Senate Mailing Address 1412 Energy Park Drive #11 City State Zip Code Saint Paul MN 55108 Purpose of Disbursement Contribution Candidate Name Sen. Norm Coleman Office Sought: Mouse Distressment For: 2008 City Senate Primary X General Other (specify) ▼ Transaction ID: 15873456 Date of Disbursement this Peri MN 55108 Amount of Each Disbursement this Peri Candidate Name (Last, First, Middle Initial) Boucher For Congress Committee Mailing Address PO Box 2000 City State Zip Code VA 24212 Purpose of Disbursement Contribution Candidate Name (Last, First, Middle Initial) State: VA District: 09 Full Name (Last, First, Middle Initial) Contribution Contribution Contribution Condidate Name Rep. Rick Boucher Colice Sought: X House President State: VA District: 09 Full Name (Last, First, Middle Initial) Code For Congress Mailing Address 235 South Main Street City State Zip Code VA 24151 Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate President Category/ Type Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution				
Norm Coleman For U.S. Senate Mailing Address 1412 Energy Park Drive #11 City Saint Paul MN 55108 Purpose of Disbursement Contribution Candidate Name Son. Norm Coleman Office Sought: House President State: MN District: Full Name (Last, First, Middle Initial) Senate President Contribution City State Zip Code Abingdon VA 24212 Purpose of Disbursement Contribution City State Zip Code VA 24212 Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought: X House President Contribution State: WA District: Disbursement For: 2008 VA 24212 Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Disbursement For: 2008 Primary X General President Contribution State: VA District: 09 Full Name (Last, First, Middle Initial) Goode For Congress Mailing Address 235 South Main Street City State Zip Code VA 24151 Contribution	` '			
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State: MN District: Primary General Other (specify) ▼			Category/	
Full Name (Last, First, Middle Initial) Boucher For Congress Committee Mailing Address PO Box 2000 City State Zip Code VA 24212 Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought: X House Primary X General Primary X General State of Disbursement Coty Mailing Address 235 South Main Street City State Zip Code VA 24212 Amount of Each Disbursement this Perivacy Type Contribution Contribution Transaction ID: 15873457 Date of Disbursement this Perivacy Y 2 0 0 8 Y Amount of Each Disbursement this Perivacy X General Disbursement For: 2008 Primary X General District: 09 Full Name (Last, First, Middle Initial) Goode For Congress Mailing Address 235 South Main Street City State Zip Code VA 24151 City Code VA 24151 Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Disbursement For: 2008 Senate Primary X General Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Disbursement For: 2008 Senate Primary X General Contribution Contribution Contribution Contribution	X Senate	Primary X General		Contribution
Boucher For Congress Committee Mailing Address PO Box 2000 City State Zip Code Abingdon VA 24212 Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought: X House Senate Primary X General President State: VA District: 09 Full Name (Last, First, Middle Initial) Goode For Congress Mailing Address 235 South Main Street City State Zip Code VA 24151 City Rocky Mount State Zip Code VA 24151 Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Disbursement For: 2008 Date of Disbursement The Period Nation Street City State Zip Code VA 24151 Category/ Type Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Disbursement For: 2008 Senate Primary X General Contribution		_		T
City State Zip Code Abingdon VA 24212 Purpose of Disbursement Contribution 011 Candidate Name Rep. Rick Boucher Office Sought: X House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Goode For Congress Mailing Address 235 South Main Street City State Zip Code VA 24151 Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Category/ Type Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Contribution				Date of Disbursement
Abingdon VA 24212 Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought: X House Senate Primary X General Other (specify) ▼ Full Name (Last, First, Middle Initial) Goode For Congress Mailing Address 235 South Main Street City State Zip Code Rocky Mount VA 24151 Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General Other (specify) ▼ Contribution	Mailing Address PO Box 2000			08
Purpose of Disbursement Contribution Candidate Name Rep. Rick Boucher Office Sought:				Amount of Each Disbursement this Period
Candidate Name Rep. Rick Boucher Office Sought:	Purpose of Disbursement		011	1000.00
Office Sought:			Category/	
Goode For Congress Mailing Address 235 South Main Street City State Zip Code Rocky Mount VA 24151 Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary X General President Date of Disbursement 0 8 M / 2 9 / 2 0 0 8 Y 3 0 0 8 Y 4 0 0 8 M 2 0 0 8 Y 4 0 0 8 M 2 0 0 8 Y 4 0 0 8 M	Senate President	Primary X General		Contribution
Mailing Address 235 South Main Street City State Zip Code				
Rocky Mount Purpose of Disbursement Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary President Other (specify) Other (specify) Category/ Type Contribution Contribution Contribution Contribution	Mailing Address 235 South Main Street			- 08 M / 29 / Y 2008
Contribution Candidate Name Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary President Other (specify) Category/ Type Contribution Category/ Type Contribution				
Rep. Virgil H. Goode, Jr. Office Sought: X House Senate Primary President Disbursement For: 2008 Primary X General Other (specify) Contribution	Contribution		011	1000.00
Senate Primary X General President Other (specify) ▼				
State: VA District: 05	Senate President	Primary X General		Contribution
	State: VA District: 05			

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	(check onl	NUMBER: PAGE 86 / 93
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Tenn Polictical Action Committee - Tenn	PAC		Transaction ID: 15878252 Date of Disbursement
Mailing Address 228 South Washington Suite 115			08 08 7 21 7 2008
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Perio
Purpose of Disbursement 2008 Contribution Candidate Name		011 Category/	5000.00
Office Sought: Senate President State: Disbur:	sement For: Primary General Other (specify)	Туре	2008 Contribution
Full Name (Last, First, Middle Initial) Roskam For Congress Committee			Transaction ID: 15878255 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P. O. Box 713 City	State Zip Code		Amount of Each Disbursement this Perio
Wheaton	IL 60187		5000.00
Purpose of Disbursement Contribution Candidate Name Rep. Peter Roskam		011 Category/ Type	3000.00
Office Sought: X House Disbury Senate President State: IL District: 06	sement For: 2008 Primary X General Other (specify)		Contribution
Full Name (Last, First, Middle Initial) Charles A. Gonzalez Congressional Cam	paign		Transaction ID: 15878258 Date of Disbursement
Mailing Address PO Box 12612			08 7 21 7 2008
City San Antonio	State Zip Code TX 78212	1	Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution Candidate Name		011 Category/	1000.00
Rep. Charles A. Gonzalez	sement For: 2008	Type	
Senate President State: TX District: 20	Primary X General Other (specify) ▼		Contribution
'			44000.00
SUBTOTAL of Disbursements This Page (optional)		11000.00

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SCHEDULE B (FEC Form 3X)		, FOR LINE NUMBER:			PAGE 87/93			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	<u> </u>			_	1	_
	Detailed Summary Page	21b 27	22 X	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and State	nents may not be sold or used I					 ontril		
or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full)								
American Hospital Association PAC								
Full Name (Last, First, Middle Initial) Stupak For Congress			Transact Date of D			3264	-	
Mailing Address 817 Ninth Avenue, P.O.	Pov 156		0 8 M	/ D2	D / `	´ ž	0 ŏ 8	3 ^Y
City Menominee	State Zip Code MI 49858		Amount o	of Each	Disburse	-	-	
Purpose of Disbursement Contribution		011				. (0.00	0
Candidate Name Rep. Bart Stupak		Category/ Type						
Office Sought: X House Disburs Senate President	ement For: 2008 Primary X General Other (specify) ▼		Contribu	tion				
State: MI District: 01								
Full Name (Last, First, Middle Initial) Friends Of Lois Capps			Transact Date of D	-		3266	;	
Mailing Address PO Box 23940			0 8 M	[/] 2	1 /	Ž	0 0 8	3 ^Y
City Santa Barbara	State Zip Code CA 93121		Amount o	of Each	Disburse	emen	t this I	Period
Purpose of Disbursement Contribution		011				10	0.00	0
Candidate Name Rep. Lois Capps		Category/ Type						
Office Sought: X House Senate President State: CA District: 23	ement For: 2008 Primary X General Other (specify)		Contribu	tion				
Full Name (Last, First, Middle Initial) Friends Of Mark Warner			Transact Date of D			3275	;	
Mailing Address 1029 North Royal Stree	2nd Fl		0 8 M	[/] 2	D / `	Ź	0 ŏ 8	B^{Y}
City Alexandria	State Zip Code VA 22314		Amount o	of Each	Disburse	emen	t this I	Period
Purpose of Disbursement Contribution		011				50	0.00	0
Candidate Name Mr. Mark Warner		Category/ Type						
Office Sought: House Disburs X Senate President State: VA District:	ement For: 2008 Primary X General Other (specify) ▼		Contribu	tion				
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	Information copied from such Reports and Star r commercial purposes, other than using the na				
1 \	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
	full Name (Last, First, Middle Initial) Pastor For Arizona				Transaction ID: 15878301 Date of Disbursement
N	Mailing Address PO Box 6554				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ D & O & 0 & 8 \end{smallmatrix} $
	Dity Phoenix	State Zip Code AZ 85005			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution)11	3000.00
	Candidate Name Rep. Ed Pastor			egory/ ype	
	Office Sought: X House Senate President State: AZ District: 04	rsement For: 2008 X Primary General Other (specify)	al		Contribution
F	Full Name (Last, First, Middle Initial) Committee for the Preservation of Capit	alism (CPC)			Transaction ID: 15878365 Date of Disbursement
N	Mailing Address P.O. Box 65314				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 2 & D \\ D & 2 & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Q & N \\ Y & 2 & O & O & 8 \end{bmatrix}$
	City Vashington	State Zip Code DC 22036			Amount of Each Disbursement this Perio
$\frac{V}{C}$	Purpose of Disbursement /oid of 4/08 check Candidate Name			011 egory/	-5000.00
C	Committee for the Preservation of Capit Office Sought: House Disbut Senate President State: District:	alism (CPC) rsement For: Primary General Other (specify)		ype	Void of 4/08 check
	full Name (Last, First, Middle Initial) Trust PAC				Transaction ID: 15878367 Date of Disbursement
N	Mailing Address PO Box 221543				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & S \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & D & D \\ Y & D & D & S \end{smallmatrix} \end{bmatrix}$
	City Chantilly	State Zip Code VA 20151			Amount of Each Disbursement this Perio
V	Purpose of Disbursement Void of 4/08 check			011	-1000.00
_	Candidate Name			egory/ ype	
	Office Sought: House Disbute Senate President District:	rsement For: Primary General Other (specify)	al		Void of 4/08 check
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		R LINE N		R:		PA	AGE	89 / 9	93
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		eck only only only on the control of	one) 22 28a		23 [28b	24 28c	П	25 29	26 30b
Any Information copied from such Reports and State		d by any p	erson fo	the pu	rpos	e of so	liciting c		outions	
or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	le and address of any political	COMMI	e to sone	or Corti	ibulio	JIIS ITO	m such (COMM	шее	
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee						on ID: sburse	15878 ment	3369		
Mailing Address PO Box 360				0 ^M 8	M /	^D 2	9 /	Ž	ο ὁ ε	3 Y
City Prescott	State Zip Code AR 71857			Amou	nt of	Each	Disburse	-		
Purpose of Disbursement Void of 4/08 check		011		L.				-25	00.00)
Candidate Name Rep. Michael A. Ross	2000	Catego Type	-							
	ement For: 2008 Primary General Other (specify)			Void o	of 4/	08 ch	eck			
Full Name (Last, First, Middle Initial) Charles Boustany Jr Md For Congress Inc	<u> </u>					on ID:	15880)258		
Mailing Address PO Box 80126					M /	^D 0	D / `	Ž	o ŏ e	B Y
City Lafayette	State Zip Code LA 70598			Amou	nt of	Each	Disburse	ement	t this F	Period
Purpose of Disbursement In-Kind Contribution: Polling Services		011			-			48	75.00)
Candidate Name Rep. Charles W. Boustany, Jr.		Catego Type	-							
Senate >	ement For: 2008 Primary General Other (specify)			In-Kin ling S			ution: F	Pol-		
State: LA District: 07 Full Name (Last, First, Middle Initial)							.=			
Nancy Pelosi For Congress				Date o		sburse				Y
Mailing Address 235 Montgomery Street Suite 610				0 8			1 '		οŏε	
City San Francisco	State Zip Code CA 94104			Amou	nt of	Each	Disburse	-		
Purpose of Disbursement Contribution		011						50	00.00)
Candidate Name Rep. Nancy Pelosi		Catego Type								
Office Sought: X House Disburs Senate President State: CA District: 08	ement For: 2008 Primary X General Other (specify)			Contri	ibuti	on				
SUBTOTAL of Disbursements This Page (optional)			•					73	75.00	
TOTAL This Period (last page this line number only			•							

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 90 / 93
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 22 23 24 25 26
	Botanoa Garrinary Fago	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	le and address of any political	Committee to so	micit contributions from such committee
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) LoBiondo For Congress			Transaction ID: 15881990 Date of Disbursement
Mailing Address PO Box 775			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & R \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & I \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & D & D & R \end{smallmatrix} \end{bmatrix}$
City Marmora	State Zip Code NJ 08223		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Frank A. LoBiondo		Category/ Type	
Senate President	ement For: 2008 Primary X General Other (specify)		Contribution
State: NJ District: 02 Full Name (Last, First, Middle Initial)			
Kirk For Congress			Transaction ID: 15882002 Date of Disbursement
Mailing Address P.O. Box 8			08
City Winnetka	State Zip Code IL 60093		Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement Contribution		011	1300.00
Candidate Name Rep. Mark Steven Kirk		Category/ Type	
Senate President	ement For: 2008 Primary X General Other (specify)		Contribution
State: IL District: 10 Full Name (Last, First, Middle Initial)			
Boyd For Congress			Transaction ID: 15882003 Date of Disbursement
Mailing Address P.O. Box 15703			08
City Tallahassee	State Zip Code FL 32317		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	1500.00
Candidate Name Rep. Allen Boyd		Category/ Type	
Office Sought: X House Disburs Senate President State: FL District: 02	ement For: 2008 Primary X General Other (specify)		Contribution
SUBTOTAL of Disbursements This Page (optional)			4000.00
TOTAL This Period (last page this line number only			66975.00

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age# 28933087277			
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	NUMBER: PAGE 91 / 93 / one) 22
	Detailed Guillinary Fage	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: 15808615
Public Opinion Strategies			Date of Disbursement
Mailing Address 214 North Fayette Stree	:		$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 4 & 0 \end{bmatrix} / \begin{bmatrix} 1 & 1 & 1 & 1 \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Period
Purpose of Disbursement Polling Services		005	13000.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	7,72	Polling Services
State: District:			
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 15878038 Date of Disbursement
Mailing Address Ste. 001			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Chicago Purpose of Disbursement	IL 60679		4.50
Merchant Fees		001	
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		Merchant Fees
State: District:			
Full Name (Last, First, Middle Initial) Merchant Bankcard			Transaction ID: 15878039 Date of Disbursement
Mailing Address 1601 Elm Street			$\begin{bmatrix} 0 & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 4 & 0 \end{bmatrix} / \begin{bmatrix} 1 & 1 & 1 & 1 \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement			80.20
Merchant Fees		001	
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify) ▼		Merchant Fees
State: District:			
SUBTOTAL of Disbursements This Page (optional))	13084.70

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 92 / 93 y one)
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Merchant Bankcard			Transaction ID: 15878043 Date of Disbursement
Mailing Address 1601 Elm Street			$\begin{bmatrix} 0 & 8 & M & M & M & M & M & M & M & M & M$
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	3.50
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		Merchant Fees
Full Name (Last, First, Middle Initial)			Transaction ID: 15878053
American Express			Date of Disbursement
Mailing Address Ste. 001			$\begin{bmatrix} M & M \\ 0 & 8 \end{bmatrix}$ $\begin{bmatrix} D & D \\ 0 & 5 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Chicago	State Zip Code IL 60679		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	7.38
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		Merchant Fees
State: District: Full Name (Last, First, Middle Initial)			Transportion ID: 15070054
Citibank, F.S.B.			Transaction ID: 15878054 Date of Disbursement
Mailing Address 1400 G Street, NW			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} B^{M} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ I \end{smallmatrix} D \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ I \end{smallmatrix} Q \end{smallmatrix} O O B^{Y} $
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Bank Fee		001	94.25
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify) ▼		Bank Fee
State: District:			
SUBTOTAL of Disbursements This Page (optional)			105.13

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5(CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 93/93
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	y Information copied from such Reports and Stator commercial purposes, other than using the n			
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial)			Transaction ID: 15880255
	Public Opinion Strategies			Date of Disbursement
	Mailing Address 214 North Fayette Str	eet		08 08 7 0 4 7 2 0 0 8
	City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Period
	Purpose of Disbursement In-Kind to Charles Boustany (LA-7). See Line 2	3.	005	-4875.00
	Candidate Name		Category/ Type	
	Office Sought: House Disbuter Senate President	rsement For: Primary General Other (specify)		In-Kind to Charles Bousta- ny (LA-7). See Line 23.
	State: District:	• • • • • •		

SUBTOTAL of Disbursements This Page (optional)	•	-4875.00
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